

Welcome to the PIA for FY 2011!

Congress passed the E-Government Act of 2002 to encourage the use of Web-based Internet applications or other information technology by Government agencies, with the intention of enhancing access to government information and services and increasing the effectiveness, efficiency, and quality of government operations.

To combat public concerns regarding the disclosure of private information, the E-Government Act mandated various measures, including the requirement that Federal agencies conduct a Privacy Impact Assessment (PIA) for projects with information technology systems that collect, maintain, and/or disseminate "personally identifiable information" of the public. Personally identifiable information, or "personal information," is information that may be used to identify a specific person.

The Privacy Act and VA policy require that personally identifiable information only be used for the purpose(s) for which it was collected, unless consent (opt-in) is granted. Individuals must be provided an opportunity to provide consent for any secondary use of information, such as use of collected information for marketing.

Directions:

VA 6508 is the directive which outlines the PIA requirement for every System/Application/Program.

If you find that you can't click on checkboxes, make sure that you are: 1) Not in "design mode" and 2) you have enabled macros.

PIA Website: http://vawww.privacy.va.gov/Privacy_Impact_Assessments.asp

Roles and Responsibilities:

Roles and responsibilities for the specific process are clearly defined for all levels of staff in the VA Directive 6508 referenced in the procedure section of this document.

- a. The Privacy Officer is responsible for the overall coordination and review of the PIA to ensure compliance with VA Directive 6508.
- b. Records Officer is responsible for supplying records retention and deletion schedules.
- c. Information Technology (IT) staff responsible for the privacy of the system data will perform a PIA in accordance with VA Directive 6508 and to immediately report all anomalies to the Privacy Service and appropriate management chain.
- d. Information Security Officer (ISO) is responsible for assisting the Privacy Officer and providing information regarding security controls.
- e. The CIO is responsible for ensuring that the systems under his or her jurisdiction undergo a PIA. This responsibility includes identifying the IT systems; coordinating with the Privacy Officer, Information Security Officer, and others who have concerns about privacy and security issues; and reviewing and approving the PIA before submission to the Privacy Service.

Definition of PII (Personally Identifiable Information)

Information in identifiable form that is collected and stored in the system that either directly identifies an individual by name, address, social security number, telephone number, e-mail address, biometric identifiers, photograph, or other unique numbers, codes or characteristics or combined, indirect identify an individual such as a combination of gender, race, birth date, geographical indicators, license number is also considered PII.

Macros Must Be Enabled on This Form

Microsoft Office 2003: To enable macros, go to: 1) Tools > Macros > Security - Set to Medium; 2) Click OK; 3) Close the file and when reopening click on Enable Macros at the prompt.

Microsoft Office 2007: To enable macros, go to: 1) Office Button > Prepare > Excel Options > Trust Center > Trust Center Settings > Macro Settings > Enable

All Macros; 2) Click OK

Final Signatures

Final Signatures are digitally signed or wet signatures on a case by case basis. All signatures should be done when all modifications have been approved by the VA Privacy Service and the reviewer has indicated that the signature is all that is necessary to obtain approval.

Privacy Impact Assessment Uploaded into SMART

Privacy Impact Assessments should be uploaded into C&A section of SMART.

All PIA Validation Letters should be emailed to christina.pettit@va.gov to received full credit for submission.

(FY 2011) PIA: System Identification

Program or System Name:	Region 1>VHA>VISN 19>Sheridan VAMC>VistA		
OMB Unique System / Application / Program Identifier	(AKA: UPID #):	029-00-01-11-01-1180-00	
Description of System/ Application/ Program:	The VistA Legacy system runs on InterSystems Cache on VMS [VMS/Cache] platform and is located at		
Facility Name:	Sheridan Veterans Affairs Medical Center		
Title:	Name:	Phone:	Email:
Privacy Officer:	Jamie Banks	307.675.3611	jamie.banks@va.gov
Information Security Officer:	Doug Bohnenblust	307.675.3880	douglas.bohnenblust@va.gov
System Owner/ Chief Information Officer:	Cynthia Sostrom	307.675.3143	cynthia.sostrom@va.gov
Information Owner:			
Other Titles:			
Person Completing Document:	Nancy Snively	307.675.3798	nancy.snively@va.gov
Other Titles:			
Date of Last PIA Approved by VACO Privacy Services: (MM/YYYY)			05/2009
Date Approval To Operate Expires:			08/2011
What specific legal authorities authorize this program or system:	Title 38, USC, Section 7301		
What is the expected number of individuals that will have their PII stored in this system:	60723 VA Personnel and 53502 patients		
Identify what stage the System / Application / Program is at:	Operations/Maintenance		
The approximate date (MM/YYYY) the system will be operational (if in the Design or Development stage), or the approximate number of years the system/application/program has been in operation.	Operational 10 plus years		
Is there an authorized change control process which documents any changes to existing applications or systems?	Yes		
If No, please explain:			
Has a PIA been completed within the last three years?	Yes		
Date of Report (MM/YYYY):	01/2011		

Please check the appropriate boxes and continue to the next TAB and complete the remaining questions on this form.

- ☐ Have any changes been made to the system since the last PIA?
- ☒ Is this a PIV system/application/program collecting PII data from Federal employees, contractors, or others performing work for the VA?
- ☒ Will this system/application/program retrieve information on the basis of name, unique identifier, symbol, or other PII data?
- ☒ Does this system/application/program collect, store or disseminate PII/PHI data?
- ☒ Does this system/application/program collect, store or disseminate the SSN?

If there is no Personally Identifiable Information on your system , please complete TAB 7 & TAB 12. (See Comment for Definition of PII)

(FY 2011) PIA: System of Records

Is the data maintained under one or more approved System(s) of Records? If the answer above no, please skip to row 15.

Yes

For each applicable System(s) of Records, list:

1. All System of Record Identifier(s) (number):

23VA16, 24VA19, 79VA19, 97VA105, 99VA13, 121VA19
Information System and Technology Architecture (VistA-
VA), Patient Medical Records, Non-VA Fee Basis
Records, Consolidated Data Information System,
Automated Safety Incident Surveillance and Tracking
System, National Patient Databases

2. Name of the System of Records:

3. Location where the specific applicable System of Records Notice may be accessed
(include the URL):

http://www.rms.oit.va.gov/SOR_Records.asp

Have you read, and will the application, system, or program comply with, all data
management practices in the System of Records Notice(s)?

Yes

Does the System of Records Notice require modification or updating?

No

(Please Select Yes/No)

Is PII collected by paper methods?

Yes

Is PII collected by verbal methods?

Yes

Is PII collected by automated methods?

Yes

Is a Privacy notice provided?

Yes

Proximity and Timing: Is the privacy notice provided at the time of data collection?

No

Purpose: Does the privacy notice describe the principal purpose(s) for which the information
will be used?

Yes

Authority: Does the privacy notice specify the effects of providing information on a voluntary
basis?

No

Disclosures: Does the privacy notice specify routine use(s) that may be made of the
information?

Yes

(FY 2011) PIA: Notice

Please fill in each column for the data types selected.

Data Type	Collection Method	What will the subjects be told about the information collection?	How is this message conveyed to them?	How is a privacy notice provided?
Veteran or Primary Subject's Personal Contact Information (name, address, telephone, etc)	Paper	The most common data types that are captured and accessed on a regular basis by authroized individuals are first and last name, middle initial, DOB, SSN, and address. This patient informationfalls into two classes: administrative and clinical. Clinical Information is used to diagnose, prescribe treatment and follow clinically the patient through his/her health care encounters. Administrative data is used to identify the veteran (SSN), correspond to/from (name and address), and determine eligibility (patient administrative info + SSA and IRS data) and for payment of healthcare.	Verbally	Written
Family Relation (spouse, children, parents, grandparents, etc)	Paper	The information gathered will be used to determine eligiblity and will not be	Verbally	Written
Service Information	Paper	Military Service Information (Branch of service, discharge date, discharge type, service connection, medical conditions related to military service) This information is collected to assess eligibility for VA healthcare benefits, type of healthcare needed.	Verbally	Written

VistA-Legacy applications are used to meet a wide range of health care data needs. The system collects a wide range of personal medical information for clinical diagnosis, treatment, patient evaluation, and patient care. Common types of personal medical information would include lab test results, prescriptions, allergies, medical diagnosis, vital signs, etc. The information is used to treat and care for the veteran patient. Clinical information from VA and DoD is used in the diagnosis and treatment of veterans.

Medical Information	Electronic/File Transfer	Verbally	Written
Criminal Record Information			

Next of kin, DNR instructions, health care proxy designation. This information is used in the notification process and as required for medical decisions.

Guardian Information	Paper	Verbally	Written
Education Information	N/A		

Treatment notes, progress notes, clinical assessments, clinical diagnosis information is collected. Used in follow-up treatment and as part of the medical history. C&P examinations are also performed with information input into the CAPRI system utilized by VBA.

Benefit Information	Paper	Verbally	Written
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Other (Explain)	Paper	Next of kin information and emergency contact information, such as name and telephone number is collected from the veteran to use to contact other individuals in case of an emergency. In addition insurance and employment information is available on the veteran for use in billing for care.	Verbally	Written
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Data Type	Is Data Type Stored on your system?	Source (If requested, identify the specific file, entity and/or name of agency)	Is data collection Mandatory or Voluntary?	Additional Comments
Veteran or Primary Subject's Personal Contact Information (name, address, telephone, etc)	Yes	Veteran	Mandatory	Data used to identify the veteran, determine eligibility for care, schedule treatment, manage healthcare and payment or reimbursement of authorized healthcare
Family Relation (spouse, children, parents, grandparents, etc)	Yes	Veteran	Voluntary	
Service Information	Yes	Veteran	Mandatory	

Medical Information	Yes	Veteran	Mandatory
Criminal Record Information	No		
Guardian Information	Yes	Veteran	Voluntary
Education Information	No		
Benefit Information	Yes	Veteran	Mandatory
Other (Explain)			
Other (Explain)			
Other (Explain)			

(FY 2011) PIA: Data Sharing

Organization	Name of Agency/Organization	Do they access this system?	Identify the type of Data Sharing and its purpose.	Is PII or PHI Shared?	What is the procedure you reference for the release of information?
Internal Sharing: VA Organization	VBA	No	Comp & Pen examinations input into CAPRI templates.	Both PII & PHI	VHA Handbook 1605.1 as referenced by local Privacy Policy
Other Veteran Organization					
Other Federal Government Agency	IRS, SSA, DoD	No	Income verification to	Both PII & PHI	VHA Handbook 1605.1 as
State Government Agency	Medicaid, Licensing Boards, Courts	No	Used to determine eligibility of benefits and identification of authorized patient representatives	Both PII & PHI	VHA Handbook 1605.1 as referenced by local Privacy Policy
Local Government Agency					
Research Entity					
Other Project / System					
Other Project / System					
Other Project / System					

(FY 2011) PIA: Access to Records

Does the system gather information from another system?	No
Please enter the name of the system:	
Per responses in Tab 4, does the system gather information from an individual?	Yes
If information is gathered from an individual, is the information provided:	<input checked="" type="checkbox"/> Through a Written Request <input checked="" type="checkbox"/> Submitted in Person <input type="checkbox"/> Online via Electronic Form
Is there a contingency plan in place to process information when the system is down?	Yes

(FY 2011) PIA: Secondary Use

Will PII data be included with any secondary use request?	No
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- ☐ Drug/Alcohol Counseling ☐ Mental Health ☐ HIV
☐ Research ☐ Sickle Cell ☐ Other (Please Explain)

if yes, please check all that apply:

Describe process for authorizing access to this data.

Answer:

(FY 2011) PIA: Program Level Questions

Does this PIA form contain any sensitive information that could cause harm to the Department of Veterans Affairs or any party if disclosed to the public?

No

If Yes, Please Specify:

Explain how collected data are limited to required elements:

Answer:

How is data checked for completeness?

Answer:

What steps or procedures are taken to ensure the data remains current and not out of date?

Answer:

How is new data verified for relevance, authenticity and accuracy?

Answer:

Additional Information: (Provide any necessary clarifying information or additional explanation for this section.)

Answer:

(FY 2011) PIA: Retention & Disposal

What is the data retention period?

Answer: Clinical information is retained in accordance with VA Records Control Schedule 10-1 which is 75 years after the last episode of patient care.

Explain why the information is needed for the indicated retention period?

Answer: The information is retained for healthcare purposes.

What are the procedures for eliminating data at the end of the retention period?

Answer: The electronic final version of patient medical record is destroyed/deleted 75 years after the last episode of patient care as instructed in VA

Where are these procedures documented?

Answer: [Http://vaww1.va.gov/vapubs/viewPublication.asp?Pub_ID=19&Ftype=2](http://vaww1.va.gov/vapubs/viewPublication.asp?Pub_ID=19&Ftype=2) and VHA Records Control

How are data retention procedures enforced?

Answer: Records Management Responsibilities. The Health Information Resources Service (HIRS) is responsible for developing policies, and

Has the retention schedule been approved by the National Archives and Records Administration (NARA)

Yes

Additional Information: (Provide any necessary clarifying information or additional explanation for this section.)

Answer:

(FY 2011) PIA: Children's Online Privacy Protection Act (COPPA)

Will information be collected through the internet from children under age 13?

No

If Yes, How will parental or guardian approval be obtained?

Answer:

(FY 2011) PIA: Security

Is the system/application/program following IT security Requirements and procedures required by federal law and policy to ensure that information is appropriately secured. Yes

Has the system/application/program conducted a risk assessment, identified appropriate security controls to protect against that risk, and implemented those controls.. Yes

Is security monitoring conducted on at least a quarterly basis to ensure that controls continue to work properly, safeguarding the information? Yes

Is security testing conducted on at least a quarterly basis to ensure that controls continue to work properly, safeguarding the information? Yes

Are performance evaluations conducted on at least a quarterly basis to ensure that controls continue to work properly, safeguarding the information? Yes

If 'No' to any of the 3 questions above, please describe why:

Answer:

Is adequate physical security in place to protect against unauthorized access? Yes

If 'No' please describe why:

Answer:

Explain how the project meets IT security requirements and procedures required by federal law.

Answer: A C&A is performed on the system every 3 years with the last one completed in 2010.

Explain what security risks were identified in the security assessment? *(Check all that apply)*

- | | | |
|--|--|--|
| <input type="checkbox"/> Air Conditioning Failure | <input type="checkbox"/> Data Disclosure | <input checked="" type="checkbox"/> Hardware Failure |
| <input type="checkbox"/> Chemical/Biological Contamination | <input type="checkbox"/> Data Integrity Loss | <input type="checkbox"/> Identity Theft |
| <input type="checkbox"/> Blackmail | <input type="checkbox"/> Denial of Service Attacks | <input type="checkbox"/> Malicious Code |
| <input type="checkbox"/> Bomb Threats | <input type="checkbox"/> Earthquakes | <input type="checkbox"/> Power Loss |
| <input type="checkbox"/> Burglary/Break In/Robbery | <input type="checkbox"/> Eavesdropping/Interception | <input type="checkbox"/> Sabotage/Terrorism |
| <input checked="" type="checkbox"/> Cold/Frost/Snow | <input type="checkbox"/> Errors (Configuration and Data Entry) | <input type="checkbox"/> Storms/Hurricanes |
| <input type="checkbox"/> Communications Loss | <input checked="" type="checkbox"/> Fire (False Alarm, Major, and Minor) | <input type="checkbox"/> Substance Abuse |
| <input type="checkbox"/> Computer Intrusion | <input checked="" type="checkbox"/> Flooding/Water Damage | <input type="checkbox"/> Theft of Assets |
| <input type="checkbox"/> Computer Misuse | <input type="checkbox"/> Fraud/Embezzlement | <input type="checkbox"/> Theft of Data |
| <input type="checkbox"/> Data Destruction | | <input type="checkbox"/> Vandalism/Rioting |

Answer: (Other Risks)

Explain what security controls are being used to mitigate these risks. *(Check all that apply)*

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Access Control | <input checked="" type="checkbox"/> Contingency Planning | <input checked="" type="checkbox"/> Personnel Security |
| <input checked="" type="checkbox"/> Audit and Accountability | <input checked="" type="checkbox"/> Identification and Authentication | <input checked="" type="checkbox"/> Physical and Environmental Protection |
| <input checked="" type="checkbox"/> Awareness and Training | <input checked="" type="checkbox"/> Incident Response | <input checked="" type="checkbox"/> Risk Management |
| <input checked="" type="checkbox"/> Certification and Accreditation Security Assessments | | |
| <input checked="" type="checkbox"/> Configuration Management | <input checked="" type="checkbox"/> Media Protection | |

Answer: (Other Controls)

PIA: PIA Assessment

Identify what choices were made regarding the project/system or collection of information as a result of performing the PIA.

Answer: No choices were made regarding the systems during the performance of the PIA. This has been a fact finding process

Availability Assessment: If the data being collected is not available to process for any reason what will the potential impact be upon the system or organization?
(Choose One)

- | | |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | The potential impact is high if the loss of availability could be expected to have a severe or catastrophic adverse effect on operations, assets or individuals. |
| <input type="checkbox"/> | The potential impact is moderate if the loss of availability could be expected to have a serious adverse effect on operations, assets or individuals. |
| <input type="checkbox"/> | The potential impact is low if the loss of availability could be expected to have a limited adverse effect on operations, assets or individuals. |
-

Integrity Assessment: If the data being collected has been corrupted for any reason what will the potential impact be upon the system or organization?
(Choose One)

- | | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The potential impact is high if the loss of integrity could be expected to have a severe or catastrophic adverse effect on operations, assets or individuals. |
| <input type="checkbox"/> | The potential impact is moderate if the loss of integrity could be expected to have a serious adverse effect on operations, assets or individuals. |
| <input type="checkbox"/> | The potential impact is low if the loss of integrity could be expected to have a limited adverse effect on operations, assets or individuals. |
-

Confidentiality Assessment: If the data being collected has been shared with unauthorized individuals what will the potential impact be upon the system or organization? (Choose One)

- | | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The potential impact is high if the loss of confidentiality could be expected to have a severe or catastrophic adverse effect on operations, assets or individuals. |
| <input type="checkbox"/> | The potential impact is moderate if the loss of confidentiality could be expected to have a serious adverse effect on operations, assets or individuals. |
| <input type="checkbox"/> | The potential impact is low if the loss of confidentiality could be expected to have a limited adverse effect on operations, assets or individuals. |
-

The controls are being considered for the project based on the selections from the previous assessments?

The minimum security requirements for our high impact system cover seventeen security-related areas with regard to protecting the confidentiality, integrity, and availability of VA information systems and the information processed, stored, and transmitted by those systems. The security-related areas include: access control; awareness and training; audit and accountability; certification, accreditation, and security assessments; configuration management; contingency planning; identification and authentication; incident response; maintenance; media protection; physical and environmental protection; planning; personnel security; risk assessment; systems and services acquisition; system and communications protection; and system and information integrity. Our facility employs all security controls in the respective high impact security control baseline unless specific exceptions have been allowed based on the tailoring guidance provided in NIST Special Publication 800-53 and specific VA directives.

Please add additional controls:

(FY 2011) PIA: Additional Comments

Add any additional comments or information that may have been left out for any question. Please indicate the question you are responding to and then add your comments.

(FY 2011) PIA: VBA Minor Applications

Which of these are sub-components of your system?

Access Manager	Automated Sales Reporting (ASR)	Automated Folder Processing System (AFPS)
Actuarial	BCMA Contingency Machines	Automated Medical Information Exchange II (AIME II)
Appraisal System	Benefits Delivery Network (BDN)	Automated Medical Information System (AMIS)290
ASSISTS	Centralized Property Tracking System	Automated Standardized Performace Elements Nationwide (ASPEN)
Awards	Common Security User Manager (CSUM)	Centralized Accounts Receivable System (CARS)
Awards	Compensation and Pension (C&P)	Committee on Waivers and Compromises (COWC)
Baker System	Control of Veterans Records (COVERS)	Compensation and Pension (C&P) Record Interchange (CAPRI)
Bbraun (CP Hemo)	Control of Veterans Records (COVERS)	Compensation & Pension Training Website
BDN Payment History	Control of Veterans Records (COVERS)	Corporate Waco, Indianapolis, Newark, Roanoke, Seattle (Corporate WINRS)
BIRLS	Courseware Delivery System (CDS)	Distribution of Operational Resources (DOOR)
C&P Payment System	Dental Records Manager	Educational Assistance for Members of the Selected Reserve Program CH 1606
C&P Training Website	Education Training Website	Electronic Performance Support System (EPSS)
CONDO PUD Builder	Electronic Appraisal System	Enterprise Wireless Messaging System (Blackberry)
Corporate Database	Electronic Card System (ECS)	Financial Management Information System (FMI)
Data Warehouse	Electronic Payroll Deduction (EPD)	Hearing Officer Letters and Reports System (HOLAR)
EndoSoft	Eligibility Verification Report (EVR)	Inquiry Routing Information System (IRIS)
FOCAS	Fiduciary Beneficiary System (FBS)	Modern Awards Process Development (MAP-D)
Inforce	Fiduciary STAR Case Review	Personnel and Accounting Integrated Data and Fee Basis (PAID)
INS - BIRLS	Financial and Accounting System (FAS)	Personal Computer Generated Letters (PCGL)
Insurance Online	Insurance Unclaimed Liabilities	Personnel Information Exchange System (PIES)
Insurance Self Service	Inventory Management System (IMS)	Personnel Information Exchange System (PIES)
LGY Home Loans	LGY Centralized Fax System	Post Vietnam Era educational Program (VEAP) CH 32
LGY Processing	Loan Service and Claims	Purchase Order Management System (POMS)
Mobilization	Loan Guaranty Training Website	Reinstatement Entitelment Program for Survivors (REAPS)
Montgomery GI Bill	Master Veterans Record (MVR)	Reserve Educational Assistance Program CH 1607
MUSE	Mental Health Asisstant	Service Member Records Tracking System
Omnicell	National Silent Monitoring (NSM)	Survivors and Dependents Education Assistance CH 35
Priv Plus	Powerscribe Dictation System	Systematic Technical Accuracy Review (STAR)
RAI/MDS	Rating Board Automation 2000 (RBA2000)	Training and Performance Support System (TPSS)
Right Now Web	Rating Board Automation 2000 (RBA2000)	VA Online Certification of Enrollment (VA-ONCE)
SAHSHA	Rating Board Automation 2000 (RBA2000)	VA Reserve Educational Assistance Program
Script Pro	Records Locator System	Veterans Appeals Control and Locator System (VACOLS)
SHARE	Review of Quality (ROQ)	Veterans Assistance Discharge System (VADS)
SHARE	Search Participant Profile (SPP)	Veterans Exam Request Info System (VERIS)
SHARE	Spinal Bifida Program Ch 18	Veterans Service Representative (VSR) Advisor
Sidexis	State Benefits Reference System	Vocational Rehabilitation & Employment (VR&E) CH 31
Synquest	State of Case/Supplemental (SOC/SSOC)	Waco Indianapolis, Newark, Roanoke, Seattle (WINRS)

VBA Data Warehouse	Telecare Record Manager	Web Automated Folder Processing System (WAFPS)
VBA Training Academy	VBA Enterprise Messaging System	Web Automated Reference Material System (WARMS)
Veterans Canteen Web	Veterans On-Line Applications (VONAPP)	Web Automated Verification of Enrollment
VIC	Veterans Service Network (VETSNET)	Web-Enabled Approval Management System (WEAMS)
VR&E Training Website	Web Electronic Lender Identification	Web Service Medical Records (WebSMR)
Web LGY		Work Study Management System (WSMS)

Explain any minor application that are associated with your installation that does not appear in the list above. Please provide name, brief description, and any comments you may wish to include.

Name Description Comments Is PII collected by this min or application? Does this minor application store PII? If yes, where? Who has access to this data?

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(FY 2011) PIA: VISTA Minor Applications

Which of these are sub-components of your system?

x ASISTS	x Beneficiary Travel	x Accounts Receivable	x Adverse Reaction Tracking
x Bed Control	x Care Management	x ADP Planning (PlanMan)	x Authorization/ Subscription
x CAPRI	x Care Tracker	x Bad Code Med Admin	x Auto Replenishment/ Ward Stock
x CMOP	x Clinical Reminders	x Clinical Case Registries	x Automated Info Collection Sys
x Dental	x CPT/ HCPCS Codes	x Clinical Procedures	x Automated Lab Instruments
x Dietetics	x DRG Grouper	x Consult/ Request Tracking	x Automated Med Info Exchange
x Fee Basis	x DSS Extracts	x Controlled Substances	x Capacity Management - RUM
x GRECC	x Education Tracking	x Credentials Tracking	x Capacity Management Tools
x HINQ	x Engineering	x Discharge Summary	x Clinical Info Resource Network
x IFCAP	x Event Capture	x Drug Accountability	x Clinical Monitoring System
x Imaging	x Extensible Editor	x EEO Complaint Tracking	x Enrollment Application System
x Kernal	x Health Summary	x Electronic Signature	x Equipment/ Turn-in Request
x Kids	x Incident Reporting	x Event Driven Reporting	x Gen. Med.Rec. - Generator
x Lab Service	x Intake/ Output	x External Peer Review	x Health Data and Informatics
x Letterman	x Integrated Billing	x Functional Independence	x ICR - Immunology Case Registry
x Library	x Lexicon Utility	x Gen. Med. Rec. - I/O	x Income Verification Match
x Mailman	x List Manager	x Gen. Med. Rec. - Vitals	x Incomplete Records Tracking
x Medicine	x Mental Health	x Generic Code Sheet	x Interim Mangement Support
x MICOM	x MyHealthEVet	x Health Level Seven	x Master Patient Index VistA
x NDBI	x National Drug File	x Hospital Based Home Care	x Missing Patient Reg (Original) A4EL
x NOIS	x Nursing Service	x Inpatient Medications	x Order Entry/ Results Reporting
x Oncology	x Occurrence Screen	x Integrated Patient Funds	x PCE Patient Care Encounter
x PAID	x Patch Module	x MCCR National Database	x Pharmacy Benefits Mangement
x Prosthetics	x Patient Feedback	x Minimal Patient Dataset	x Pharmacy Data Management
x QUASER	x Police & Security	x National Laboratory Test	x Pharmacy National Database
x RPC Broker	x Problem List	x Network Health Exchange	x Pharmacy Prescription Practice
x SAGG	x Progress Notes	x Outpatient Pharmacy	x Quality Assurance Integration
x Scheduling	x Record Tracking	x Patient Data Exchange	x Quality Improvement Checklist
x Social Work	x Registration	x Patient Representative	x Radiology/ Nuclear Medicine
x Surgery	x Run Time Library	x PCE Patient/ HIS Subset	x Release of Information - DSSI
x Toolkit	x Survey Generator	x Security Suite Utility Pack	x Remote Order/ Entry System
x Unwinder	x Utilization Review	x Shift Change Handoff Tool	x Utility Management Rollup
x VA Fileman	x Visit Tracking	x Spinal Cord Dysfunction	x CA Verified Components - DSSI
x VBECS	x VistALink Security	x Text Integration Utilities	x Vendor - Document Storage Sys
x VDEF	x Women's Health	x VHS & RA Tracking System	x Visual Impairment Service Team ANRV
x VistALink		x Voluntary Timekeeping	x Voluntary Timekeeping National

Explain any minor application that are associated with your installation that does not appear in the list above. Please provide name, brief description, and any comments you may wish to include.

Name

Description

Comments

Is PII collected by this minor application?

Does this minor application store PII?

If yes, where?

Who has access to this data?

Name

Description

Comments

Is PII collected by this minor application?

Does this minor application store PII?

If yes, where?

Who has access to this data?

Name

Description

Comments

Is PII collected by this minor application?

Does this minor application store PII?

If yes, where?

Who has access to this data?

(FY 2011) PIA: Minor Applications

Which of these are sub-components of your system?

1184 Web

ENDSOFT

RAFT

Enterprise Terminology Server &

RALS

A4P

VHA Enterprise Terminology
Services

(FY 2011) PIA: Final Signatures

Facility Name: Region 1>VHA>VISN 19>Sheridan VAMC>VistA

Title:	Name:	Phone:	Email:
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Privacy Officer:	Jamie Banks	307.675.3611	jamie.banks@va.gov
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Digital Signature Block

Information Security Officer:	Doug Bohnenblust	307.675.3880	douglas.bohnenblust@va.gov
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Digital Signature Block

System Owner/ Chief Information Officer:	Cynthia Sostrom	307.675.3143	cynthia.sostrom@va.gov
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Digital Signature Block

Information Owner:	0	0	0
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Digital Signature Block

Other Titles:	0	0	0
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Digital Signature Block

Date of Report: 1/0/00

OMB Unique Project Identifier 029-00-01-11-01-1180-00

Project Name Region 1>VHA>VISN 19>Sheridan VAMC>VistA